



RC Update

Prepared by Rachel Blanton on behalf of the Southwest Health Collaborative (SWHC)-July 2017

The Southwest Health Collaborative has taken a “divide and conquer” strategy when it comes to meeting the needs of the medical-health neighborhood. After completing a Community Health Assessment, target areas were identified by a voting process. Each focus area has a dedicated workgroup that aims to plan and implement both clinical and prevention strategies to address health or social determinant issues. Workgroup focus areas are highlighted below.

Behavioral Health Integration: Behavioral health integration has been a major focus for the SWHC. Even before we performed a Community Health Assessment (CHA) to inform our focus areas and workgroup development, the SWHC decided that we needed to focus on advancing behavioral health integration across the region. As with all of our workgroups, we have identified both a clinical goal and a prevention goal.

Clinical- The SWHC decided to focus on co-management relationships based on consistent feedback from both specialty mental health and primary care. In addition, dedicated technical assistance on more advanced integration is available both through SHIP contractors and the state BHI workgroup. As a result, we have worked with key stakeholders to identify barriers to effective co-management communication. We have successfully facilitated discussions with leadership and mental health referral destination organizations with two of our largest healthcare systems to develop shared understanding on how to refer and respond to referrals. Memorandums of understanding between these organizations are being routed for legal review and signature. We also secured funding to bring subject matter experts from the Farley Policy Center to jointly train primary care and mental health providers on this issue.

Prevention- The SWHC has secured funding to help support a local school district to bring preventive mental health services to students. The goal is not only to deliver services to this community but also to perform a strong evaluation to develop recommendations for other school districts across the state looking to partner with community providers to develop sustainable programs for students. Optum, the state Medicaid mental health payer, has agreed to participate in project planning and development. We will be “going live” Fall 2017.

Oral health: We borrow inspiration from Southwest District Health Director, Nikki Zogg, who says “put the head back on the body”!

Clinical- The Oral Health Workgroup (a collaboration between PHD3 and PHD4) is currently working to develop a toolkit for dentists to standardize PCP contact when a patient presents with elevated blood pressure. Pathways will be established for patients with and without insurance (both commercial and Medicaid/Medicare). In addition, the group is partnering with four local dental offices (two in FQHCs and two private) to screen patients for elevated blood pressure and assess whether the patient has a medical home. It is worth noting that early data shows that between one-half and two thirds of patients accessing care through a private provider do not

have a primary care provider. This represents a major opportunity for connecting patients back to a medical home.

Prevention- Not yet identified.

ED Utilization pathways: The ED Utilization Workgroup is targeting reduction in unnecessary ED use. The Southwest Region has one of the highest rates of utilization among Medicaid beneficiaries in the state.

Clinical- The group just completed a project to create template letters for PCPs to send to patients who have inappropriate ED utilization patterns based on disease states or symptoms. This effort grew out of a request from a local primary care organization. The next project is to develop a pathway for CHWs to target ED utilization.

Prevention- The group is currently working on developing a messaging campaign to target appropriate utilization patterns.

Senior health: The SWHC has identified an opportunity to better connect seniors to appropriate care by facilitating communication between local EMS and primary care providers.

Clinical- The Senior Workgroup is partnering with Canyon County Paramedics to create a system to alert local PCPs when a patient repeatedly uses EMS but is not transported. This way, a PCP can contact the patient to schedule a visit and address the health need.

Prevention- A local EMS agency allowed the Senior Workgroup to train all of their crews on the 211 resource in order for EMS team members to share it with patients and their families as necessary. This project was a result of repeated conversations with EMS regarding social needs that often resulted in repeated calls.

Other areas of work for the RC include:

RC Grant: The RC grant, aimed at increasing connections between care coordinators in different systems is going well. A database has been developed. In addition, three trainings have occurred in the last 6 months with additional trainings scheduled for the fall.

Support for PCMH Transformation Process: The SWHC has responded to the needs identified by SHIP clinics to support PCMH transformation, including but not limited to BHI and care coordination (as described above). In addition, the SWHC supports a monthly PCMH Workgroup that includes local clinic administrators (CAs) who are interested in PCMH transformation. Local SMEs in certain areas (registry development, care coordination, huddles, etc) present and then open the floor to questions from the group. This serves to not only deliver the content but also connect CAs who might not otherwise have the opportunity to connect with their peers.

RC Sustainability Planning: The RC is confident that activities could continue for certain workgroups as they are driven by volunteer chairs and participants. The PHD is looking for opportunities to continue RC support through a vision of Public Health 3.0 as a local "Chief Health Strategist". Southwest District Health was recently awarded the Kresge Emerging Leaders in Public Health grant to support the District Director, Nikole Zogg, and SHIP Manager, Rachel Blanton, in the development of innovative solutions to convene and promote action among key medical-health neighborhood representatives.